

Amended
STATEMENT OF RELATED CASES
INFORMATION REQUIRED BY LBR 1015-2
UNITED STATES BANKRUPTCY COURT, CENTRAL DISTRICT OF CALIFORNIA

1. A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, his/her spouse, his or her current or former domestic partner, an affiliate of the debtor, any copartnership or joint venture of which debtor is or formerly was a general or limited partner, or member, or any corporation of which the debtor is a director, officer, or person in control, as follows: (Set forth the complete number and title of each such of prior proceeding, date filed, nature thereof, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

Dan Chi Tran Case Number 08-31507, Chapter 7 filed in California Central Bankruptcy on 12/10/2008, —
Standard Discharge on 07/27/2009

2. (If petitioner is a partnership or joint venture) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor or an affiliate of the debtor, or a general partner in the debtor, a relative of the general partner, general partner of, or person in control of the debtor, partnership in which the debtor is a general partner, general partner of the debtor, or person in control of the debtor as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of the proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

None.

3. (If petitioner is a corporation) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, or any of its affiliates or subsidiaries, a director of the debtor, an officer of the debtor, a person in control of the debtor, a partnership in which the debtor is general partner, a general partner of the debtor, a relative of the general partner, director, officer, or person in control of the debtor, or any persons, firms or corporations owning 20% or more of its voting stock as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

None.

4. (If petitioner is an individual) A petition under the Bankruptcy Reform Act of 1978, including amendments thereof, has been filed by or against the debtor within the last 180 days: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

None.

I declare, under penalty of perjury, that the foregoing is true and correct.

Executed at Rosemead, CA, California.

Date: October 26, 2018



Dan Chi Tran
Signature of Debtor

Signature of Joint Debtor

Attorney or Party Name, Address, Telephone & FAX Nos., State Bar No. & Email Address Randolph Ramirez 4108 Rosemead Blvd. Rosemead, CA 91770 626.288.1699 Fax: 626.288.1695 297928 randolph.ramirez@yourlegalneeds.net	FOR COURT USE ONLY
<input type="checkbox"/> Individual appearing without attorney <input checked="" type="checkbox"/> Attorney for Movant	
UNITED STATES BANKRUPTCY COURT CENTRAL DISTRICT OF CALIFORNIA	
In re: DAN CHI TRAN	CASE NO.: CHAPTER: 7
	DECLARATION BY DEBTOR(S) AS TO WHETHER INCOME WAS RECEIVED FROM AN EMPLOYER WITHIN 60 DAYS OF THE PETITION DATE [11 U.S.C. § 521(a)(1)(B)(iv)]
Debtor(s).	[No hearing Required]

Debtor(s) provides the following declaration(s) as to whether income was received from an employer within 60 days of the Debtor(s) filing this bankruptcy case (Petition Date), as required by 11 U.S.C. § 521(a)(1)(B)(iv):

Declaration of Debtor 1

1. ☒ I am Debtor 1 in this case, and I declare under penalty of perjury that the following information is true and correct:

During the 60-day period before the Petition Date (Check only ONE box below):

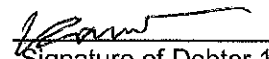
☒ **I was paid by an employer.** Attached are copies of all statements of earnings, pay stubs, or other proof of employment income I received from my employer during this 60-day period. (If the Debtor's social security number or bank account is on a pay stub or other proof of income, the Debtor must cross out (redact) the number(s) before filing this declaration.)

☐ **I was not paid by an employer** because I was either self-employed only, or not employed.

Date: 10-18-2018

DAN CHI TRAN

Printed name of Debtor 1


Signature of Debtor 1

Declaration of Debtor 2 (Joint Debtor) (If applicable)

2. ☐ I am Debtor 2 in this case, and I declare under penalty of perjury that the following information is true and correct:

During the 60-day period before the Petition Date (Check only ONE box below):

☐ **I was paid by an employer.** Attached are copies of all statements of earnings, pay stubs, or other proof of employment income I received from my employer during this 60-day period. (If the Debtor's social security number or bank account is on a pay stub or other proof of income, the Debtor must cross out (redact) the number(s) before filing this declaration.)

☐ **I was not paid by an employer** because I was either self-employed only, or not employed.

Date: _____

Printed name of Debtor 2

Signature of Debtor 2

Earnings Statement



AIRNAMIC INC
 940 ALLEN AVE
 GLENDALE, CA 91201

Period Beginning: 09/03/2018
 Period Ending: 09/09/2018
 Pay Date: 09/14/2018

Taxable Marital Status: Single
 Exemptions/Allowances:
 Federal: 0
 CA: 0

DAN C TRAN
 DEPT. 801D WM
 237 W NEWBY AVE #B
 SAN GABRIEL CA 91776

Social Security Number: XXX-XX-3353

Earnings	rate	hours	this period	year to date
Regular	11.5000	40.00	460.00	15,988.38
Overtime	17.2500	2.50	43.13	6,325.34
Bonus			34.00	9,970.00
Other	11.5000	7.00	80.50	3,095.50
Sick Leave				460.00
Vacation				1,360.00
Gross Pay			\$617.63	37,199.22

Other Benefits and Information	this period	total to date
Sick		0.00
Vacation		6.37

Deductions	Statutory	
Federal Income Tax	-56.90	3,481.89
Social Security Tax	-35.70	2,211.32
Medicare Tax	-8.35	517.16
CA State Income Tax	-11.77	749.76
CA SUI/SDI Tax	-5.75	356.66
Other		
Medical 125 Pre	-41.82*	1,532.78
Net Pay		\$457.34
Checking		457.34
Net Check		\$0.00

* Excluded from federal taxable wages
 Your federal taxable wages this period are \$575.81

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AIRNAMIC INC
940 ALLEN AVE
GLENDALE, CA 91201

Earnings Statement



Period Beginning: 08/27/2018
Period Ending: 09/02/2018
Pay Date: 09/07/2018

Taxable Marital Status: Single
Exemptions/Allowances:
Federal: 0
CA: 0

DAN C TRAN
DEPT, 801D WM
237 W NEWBY AVE #B
SAN GABRIEL CA 91776

Social Security Number: XXX-XX-3353

Earnings	rate	hours	this period	year to date	Other Benefits and Information	this period	total to date
Regular	11.5000	40.00	460.00	15,528.38	Sick		0.00
Overtime	17.2500	2.00	34.50	6,282.21	Vacation		4.06
Bonus			42.00	8,861.00			
Other	11.5000	7.50	86.25	3,015.00			
Sick Leave				460.00			
Vacation				1,360.00			
Gross Pay			622.75	35,506.59			

Deductions	Statutory		
Federal Income Tax	-57.51	3,348.32	
Social Security Tax	-36.02	2,108.97	
Medicare Tax	-8.43	493.23	
CA State Income Tax	-11.99	737.99	
CA SUI/SDI Tax	-5.81	340.16	
Other			
Medical 125 Pre	-41.82*	1,490.96	
Net Pay		\$461.17	
Checking	-461.17		
Net Check		\$0.00	

* Excluded from federal taxable wages
Your federal taxable wages this period are \$580.93

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Earnings Statement



AIRNAMIC INC
 940 ALLEN AVE
 GLENDALE, CA 91201

Period Beginning: 09/10/2018
 Period Ending: 09/16/2018
 Pay Date: 09/21/2018

Taxable Marital Status: Single
 Exemptions/Allowances:
 Federal: 0
 CA: 0

DAN C TRAN
 DEPT. 801D WM
 237 W NEWBY AVE #B
 SAN GABRIEL CA 91776

Social Security Number: XXX-XX-3353

Earnings	rate	hours	this period	year to date
Regular	11.5000	39.00	448.50	16,435.88
Overtime	17.2500	1.00	17.25	6,342.58
Bonus			40.00	10,010.00
Other	11.5000	7.50	86.25	3,181.75
Sick Leave				460.00
Vacation				1,360.00
Gross Pay			\$592.00	37,791.22

Other Benefits and Information	this period	total to date
Sick		0.00
Vacation		8.68

Deductions	Statutory	Other
Federal Income Tax	-53.82	3,535.71
Social Security Tax	-34.11	2,245.43
Medicare Tax	-7.98	525.14
CA State Income Tax	-10.64	760.40
CA SUI/SDI Tax	-5.51	362.17
Medical 125 Pre	-41.82*	1,574.60
Net Pay	\$438.12	
Checking	-438.12	
Net Check	\$0.00	

* Excluded from federal taxable wages
 Your federal taxable wages this period are \$550.18

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AIRNAMIC INC
 940 ALLEN AVE
 GLENDALE, CA 91201

Period Beginning: 09/17/2018
 Period Ending: 09/23/2018
 Pay Date: 09/28/2018

Taxable Marital Status: Single
 Exemptions/Allowances:
 Federal: 0
 CA: 0

DAN C TRAN
 DEPT. 801D WM
 237 W NEWBY AVE #B
 SAN GABRIEL CA 91776

Social Security Number: XXX-XX-3353

Earnings	rate	hours	this period	year to date
Regular	11.5000	40.00	460.00	16,896.88
Bonus			40.00	10,050.00
Other	11.5000	7.50	86.25	3,268.00
Overtime				6,342.59
Sick Leave				460.00
Vacation				1,360.00
Gross Pay			\$586.25	38,377.47

Other Benefits and Information

	this period	total to date
Sick		0.00
Vacation		10.99

Deductions Statutory

Federal Income Tax	-53.13	3,588.84
Social Security Tax	-33.76	2,279.19
Medicare Tax	-7.90	533.04
CA State Income Tax	-10.39	770.79
CA SUI/SDI Tax	-5.44	367.61

Other

Medical 125 Pre	-41.82*	1,616.42
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Net Pay **\$433.81**

Checking -433.81

Net Check **\$0.00**

* Excluded from federal taxable wages

Your federal taxable wages this period are \$544.43

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Earnings Statement

AIRNAMIC INC
 940 ALLEN AVE
 • GLENDALE, CA 91201

Period Beginning: 09/24/2018
 Period Ending: 09/30/2018
 Pay Date: 10/05/2018

Taxable Marital Status: Single
 Exemptions/Allowances:
 Federal: 0
 CA: 0

DAN C TRAN
 DEPT. 801D WM
 237 W NEWBY AVE #B
 SAN GABRIEL CA 91776

Social Security Number: XXX-XX-3353

Earnings	rate	hours	this period	year to date
Regular	11.5000	38.00	437.00	17,333.88
Bonus			38.00	10,088.00
Other	11.5000	7.00	80.50	3,348.50
Overtime				6,342.59
Sick Leave				460.00
Vacation				1,360.00
Gross Pay			\$555.50	\$8,932.97

Other Benefits and Information

	this period	total to date
Sick		0.00
Vacation		13.30

Deductions	Statutory		
Federal Income Tax		49.44	3,638.28
Social Security Tax		31.84	2,311.03
Medicare Tax		7.44	540.48
CA State Income Tax		9.03	779.82
CA SUI/SDI Tax		5.14	372.75
Other			
Medical (25 Pre)		41.82	1,658.24
Net Pay		\$410.79	
Checking		410.79	
Net Check		\$0.00	

* Excluded from federal taxable wages
 Your federal taxable wages this period are \$513.68

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